Smoking Intervention Model

ASK About Smoking At Every Visit

Document in chart

ADVISE All Smokers to Quit

Advice should be clear, strong, and personalized

ASSIST Smokers in Quitting

Assess motivation to make a quit attempt

Ready to Quit Now

- Identify reasons for wanting to quit
- Develop a quit plan
 - Set quit date within 2 weeks
 - Review previous quit attempts
 - Identify smoking triggers and challenges
 - Brainstorm strategies
 - Inform family, friends, and co-workers
- ✔ Provide self-help materials and referrals
- Encourage nicotine replacement therapy: patch, gum, nasal spray, inhaler or Non-NRT (buproplon-SR), unless contraindicated
- ✓ Give advice on successful quitting
 - Total abstinence
 - Avoid alcohol
 - Plan for dealing with smokers in the house

Not Ready to Quit Now

- ✓ Use the **4Rs** to enhance motivation
 - Relevance: Provide patient-specific information
 - Risks: Ask patient to identify negative consequences
 - Rewards: Ask patient to identify benefits
 - Repetition: Repeat every visit

ARRANGE Follow-up

If Quit (Relapse Prevention)

- ✓ Congratulate, encourage maintenance
- ✓ Review benefits from cessation
- ✓ Review successes during quit period
- ✔ Review problems encountered, offer possible solutions
- Anticipate problems or threats to maintenance, such as weight gain, depression, or prolonged withdrawal

Timing

Contact soon after the quit date, preferably within the first week; further follow-up as needed.

If Quit Attempt Unsuccessful

- ✓ Ask for recommitment to total abstinence
- ✓ Remind patient to use lapse as a learning experience
- ✔ Review circumstance that caused lapse
- ✓ Develop new plan with patient

Timing

Contact soon after new quit date, preferably during the first week; further contacts as needed based on new quit plan.

For information on smoking cessation programs, or to obtain a copy of a wallet card containing this information, call The Center for Tobacco Prevention and Control at (508) 856-4099.

Source:

The Center for Tobacco Prevention and Control, Preventive and Behavioral Medicine, University of Massachusetts Medical School, in Partnership with the Massachusetts Tobacco Control Program.